THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) No, Sir. As per NACO Sentinel Surveillance data, there are 5.2 million HIV infected persons in the country with an adult prevalence of HIV as 0.9%, whereas countries like South Africa with a population of 47.4 million has 5.5 million estimated HIV infections with an adult prevalence of HIV as 18.8%. Regarding the number of deaths due to AIDS, a total of 8689 deaths have been reported to NACO since the inception of the programme. Considering the underestimation of death, an Expert Committee is reviewing the assumptions for estimating HIV/AIDS related deaths in the country.

(c) In order to prevent and control the spread of HIV/AIDS in the country, Government of India has launched a Comprehensive National AIDS Control Programme throughtout the country since 1992 as a centrally sponsored scheme. Major focus of the programme is prevention among high risk as well as general population, care and support and provision of treatment to the needy. Under the programme, 1209 targeted intervention projects among high risk populations, Condom promotion through social marketing, 2815 integrated counseling and testing centres, 1138 Modern Blood Banks, 750 sentinel sites, 54 ART centres and 122 Community Centres are providing these services all over the country besides intensive education campaign to increase the awreness among general population.

Loopholes in Polio Eradication Programme

1887. SHRI HARISH RAWAT:
SHRI SANTOSH BAGRODIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that rise in polio cases has been reported from different parts of the country;

(b) if so, the details thereof, region-wise;

(c) what are the reasons for the rise in polio cases despite Polio Eradication Programme being enforced,

(d) whether Government have ensured that the quality of vaccine and methods of vaccination are complied as prescribed;

(e) whether it is also a fact that the country is likely to miss polio eradication target within time; and

(0 the steps being taken to plug the Loopholes?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) Yes, Sir. A rise in polio cases have been reported in the country during 2006. As of 4 August 2006, a total of 155 confirmed polio cases have been reported.

(b) The region-wise details are: 138 cases from Uttar Pradesh (UP), 14 cases from Bihar, and 1 each from Madhya Pradesh, Jharkhand, and West Bengal.

Cases in UP are concentrated around Moradabad district. Moradabad, JP Nagar, Bareilly, Badaun, and Rampur account for 71% of all cases reported in the country to date this year. Moradabad and JP Nagar districts alone have reported 65 cases, nearly 50% of all cases reported in UP. While cases have been concentrated in a fairly restricted area of western UP, more recently geographical spread has occurred and few cases have been reported from Central Uttar Pradesh.

Transmission in Bihar is at a much lower level than in UP. Of the 14 cases reported in Bihar to date in 2006,12 had onset in the first 4 months of the year. Since April 19 only two cases have been reported, in Patna and Champaran East.

(c) There are a number of factors in western UP that favour circulation of poliovirus including high population density, poor sanitation, hiqh birthrate, and high rates of enteroviruses resulting in lower vaccine efficacy. These factors, coupled with the fact that the quality of the supplemental immunization activities (SIAs) deteriorated in 2005 and early 2006 in several districts (most notably Moradabad) allowing for a build up of non-immune children, have led to the increase in cases.

(d) All batches of oral polio vaccine (OPV) used in the Polio Eradication Programme are pre-tested at CRI Kasauli. Analysis of pre-testing done for all vaccines and the data indicates that the vaccine is of good quality.

(e) India is likely to miss the current eradication target, and have transmission of wild poliovirus may continue beyond end 2006.

(f) A number of steps are being taken to plug the loopholes in the

programme implementation. SIA quality has recently improved in several districts of western UP due to number of steps that have been taken by the programme, like increased deployment of WHO/NPSP staff, increased presence of the Social Mobilization Network, training to enhance the interpersonal skills of vaccination teams, and increased focus given to revisiting houses where children may have been missed during the initial visit by the vaccination team. These improvements have been recent and will be continued and sustained for multiple rounds before their effect will be felt. At the most recent meeting of the Indian Expert Advisory Group (IEAG) it was noted that "a full twelve months of high quality activity will be necessary to ensure that immunity gaps are closed and transmission of wild poliovirus is stopped."

Complaints against AIIMS

1888. SHRI K. CHANDRAN PILLAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have received any complaint from the AIlMS faculty members on the functioning of the institute;

(b) if so, the details thereof;

(c) whether action has been taken to inquire into the allegations; and

(d) if so, the details thereof and the steps taken for rectification?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) The Faculty Association of AIIMS has made complaints against the Director, AIIMS for his indecisiveness and lack of interest in long term development of the institute, leading to surrender of funds, inaccessibility and harassment of Faculty.

(c) and (d) The Institute Body at its meeting held on 5.7.20Q6 considered the style of functioning of Director, the manner of his handling strike in May, 2006 and other related issues and resolved that the term of Director may be terminated in the public interest. However, the recommendations of Institute Body has been stayed by Delhi High Court. The matter is subjudice.

The Ministry has set up an Expert Committee under the Chairmanship of Dr. M.S. Valiathan to study the functioning of AIIMS and to make recommendations for further development of the Institute.